

Application No. :



Pondicherry Institute of Agricultural Sciences (PIAS)

[In collaboration with ANNAMALAI UNIVERSITY, accredited with 'A' GRADE by NAAC]



APPLICATION FOR ADMISSION TO DIPLOMA IN AGRICULTURE / DIPLOMA IN HORTICULTURE

(ACADEMIC YEAR 2024 2025)

Note: 1.To be filled in capital letters only.

2. Encircle wherever code number is given applicable to you

1. Name of the Candidate:(as entered in the +2 certificate)

2. Name of the Parent / Guardian:.....

3.Address for Communication:

.....
.....
.....

PIN CODE

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Phone No. (With STD Code) :

Mobile No. :

Space for affixing
Passport size
photograph

4. Sex :

Male	Female
1	2

5. Date of Birth :

Date	Month	Year

6. Nationality :

Nationality	Indian	Others
Code No.	1	2

If others, mention below

.....

7. Religion :

Religion	Hinduism	Christianity	Islam	Jainism	Others
Code No.	1	2	3	4	5

If others, mention below

.....

8. Mother tongue :

Mother tongue	Tamil	Malayalam	Telugu	Hindi	Kanadam	Others
Code No.	1	2	3	4	5	6

If others, mention below

.....

9. Community :

Community	General	BC	MBC	OBC	SC	ST
Code No.	1	2	3	4	5	6

10. Details of SSLC:

Examination Passed	Month and Year of Passing	Marks Secured	Maximum Marks	Name of the School and Place

11. Details of Qualifying Examination Passed:

Examination Passed	Month and Year of Passing	Marks Secured	Maximum Marks	Name of the School and Place

12. Subject - Wise Marks in the Qualifying Examination :

Subjects	Marks Secured	Maximum Marks
English		
Mathematics		
Physics		
Chemistry		
Biology (Botany / Zoology)		
Bio-Technology		
Vocational Agriculture		
Any Other		

DECLARATION BY THE CANDIDATE

I, Son / Daughter of hereby solemnly declare that the information furnished and the statements given in the application and the enclosures are true, correct, complete and no relevant fact is suppressed.

Place :

Date :

Signature of the Candidate

DECLARATION BY THE PARENT / GAURDIAN

I, Parent / Guardian of hereby solemnly declare that I am fully aware of the declaration given by the applicant, my Son / Daughter, and I declare and I bind myself on the same terms contained in the above declaration.

Place :

Date :

Signature of the Parent / Guardian

DD Amount Rs.500 /-

Note : D.D. Drawn in favour of **PONDICHERRY INSTITUTE OF AGRICULTURAL SCIENCES**, Payable at PUDUCHERRY
Send the Filled Application with DD to CHAIRMAN, PIAS, No.81, Lalitha Nagar Main Road,
(Opp to Aravind Eye Hospital), Thavalakupam, Puducherry - 605 007